

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 13a010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 11/11/2020
NAME OF PROVIDER OR SUPPLIER VILLAS, THE		STREET ADDRESS, CITY, STATE, ZIP CODE 289 GORDONS CORNER ROAD MANALAPAN, NJ 07726		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	<p>Initial Comments</p> <p>Initial Comments: Census: 15</p> <p>A COVID-19 Focused Infection Control Survey was conducted by the State Agency on 11/11/2020. The facility was found not to be in compliance with the New Jersey Administrative Code 8:36 infection control regulations standards for Licensure of Assisted Living Residences, Comprehensive Personal Care Homes and Assisted Living Programs and Centers for Disease Control and Prevention (CDC) recommended practice to prepare for COVID-19.</p> <p>This facility must submit a plan of correction, including a completion date for each deficiency and ensure that the plan is implemented. Failure to correct deficiencies may result in enforcement action in accordance with provisions of New Jersey Administrative Code Title 8, Chapter 43E, Enforcement of Licensure Regulations.</p>	A 000		
A1273	<p>8:36-18.1(b) Infection Prevention and Control Services</p> <p>(b) The licensed professional nurse, in coordination with the administrator, shall be responsible for the direction, provision, and quality of infection prevention and control services. The health care services director, in coordination with the administrator, shall be responsible for, but not limited to, developing and maintaining written objectives, a policy and procedure manual, and an organizational plan for the infection prevention and control service.</p>	A1273		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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A1273	<p>Continued From page 1</p> <p>This REQUIREMENT is not met as evidenced by: Based on interview, and New Jersey Department of Health (NJDOH) issued Executive Directive, the facility failed to ensure the infection control coordinator had received specialized training in infection control and prevention. This deficient practice occurred during the COVID-19 pandemic and had the potential to affect all residents who resided in the facility.</p> <p>Findings included:</p> <p>Reference: NJDOH issued Executive Directive No. 20-026-1, dated 10/10/2020, revealed the following:</p> <p>II. Required Core Practices for Infection Prevention and Control:</p> <p>ii. All facilities, except for facilities with ventilator-dependent residents, are required to have one or more individuals with training in infection prevention and control employed or contracted on a full time basis or part-time basis to provide on-site management of the Infection Prevention and Control (IPC) program. The requirements of this Directive may be fulfilled by:</p> <p>a. An individual certified by the Certification Board of Infection Control and Epidemiology or meets the requirements under N.J.A.C. 8:39-20.2;</p> <p>b. A physician who has completed an infectious disease fellowship;</p> <p>c. A healthcare professional licensed and in good standing by the State of New Jersey, with five (5) or more years of infection control experience.</p> <p>1. On 11/11/2020 at 9:55 AM, the infection control coordinator (who was also the Director of Nursing) was asked if she had completed any</p>	A1273		

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A1273	Continued From page 2 formal infection control training. She stated she had not taken any courses regarding infection control and prevention.	A1273		
A1301	8:36-18.3(a)(6) Infection Prevention and Control Services (a) Written policies and procedures shall be established and implemented regarding infection prevention and control, including, but not limited to, policies and procedures for the following: 6. Protocols for identification of residents with communicable diseases and education of residents regarding prevention and spread of communicable diseases; This REQUIREMENT is not met as evidenced by: Based on interviews, observations, policy review, and New Jersey Department of issued Executive Directive, the facility failed to ensure their infection control policy was implemented to educate residents regarding prevention and spread of communicable diseases. The facility had not educated residents regarding the importance of wearing a mask to protect themselves from contracting COVID-19 and to prevent the spread of COVID-19. This deficient practice occurred during the COVID-19 pandemic, and affected all residents who resided in the facility. Findings included: Reference: New Jersey Department of Health issued Executive Directive No. 20-026-1, dated 10/20/2020 revealed the following:	A1301		

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A1301	<p>Continued From page 3</p> <p>3. Cohorting, PPE and Training Requirements in Every Phase:</p> <p>ii. Facilities shall implement universal source control for everyone in the facility. All residents, whether they have COVID-19 symptoms or not, must practice source control when around others (surgical mask if supply is available) in accordance with CDC guidance at: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html. A face covering must NOT be worn by children under the age of two (2) or anyone who has trouble breathing, is unconscious, incapacitated, or otherwise unable to remove the mask without assistance. Source control may be provided with cloth face coverings or facemasks.</p> <p>1. On 11/11/2020 at 11:09 AM, the Director of Leisure Services was interviewed. She stated staff wore a mask but residents were not required to wear a mask during the activities because they were socially distanced.</p> <p>On 11/11/2020 at 12:03 PM, observation was made of an activity occurring in the [REDACTED]. [REDACTED] residents were in attendance, all socially distanced. None of the residents were wearing a mask. The Director of Leisure Services was wearing a mask.</p> <p>On 11/11/2020 at 12:46 PM, Certified Home Health Aide #1 stated residents were not required to wear masks when out of their apartments. She stated that she did not tell them that they needed to wear one.</p> <p>On 11/11/2020 at 12:54 PM, Residents #4, #5 and #6 were observed sitting in a conversation area in the [REDACTED]. They were socially distanced. None of the three were wearing a mask. Resident #4 stated, "We wear a mask if we</p>	A1301		

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A1301	<p>Continued From page 4</p> <p>go out." She stated she wore a mask when she goes to an outside visit. She stated all residents were "separated and no one has come down with the virus."</p> <p>Resident #5 stated staff do not encourage her to wear a mask because of being "distanced."</p> <p>Resident #6 stated, "We wear a mask when we go out of the building."</p> <p>On 11/11/2020 at approximately 1:45 PM, the Vice President (VP) of Nursing was asked if residents had been inserviced on the importance of wearing a mask when out of their apartments. She stated residents were not required to wear a mask because the facility had not had any positive cases of COVID-19 for residents or staff. She stated most residents were at low risk because they did not have comorbidities. She stated the facility was large, and with the low census, they were always able to socially distance. The VP of Nursing acknowledged the residents were at risk because of being elderly.</p> <p>Documentation of resident inservices regarding COVID-19 were reviewed back to 01/01/2020. There was no documentation which indicated the residents had been educated about the importance of wearing a mask when out of their apartments.</p> <p>Resident Council meeting minutes were reviewed back to 01/01/2020. There was no documentation which indicated the residents had been educated about the importance of wearing a mask when out of their apartments.</p> <p>On 11/11/2020 at 4:25 PM, the Executive Director (ED) stated the residents were at high risk because they were elderly, but not all of them had</p>	A1301		

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A1301	<p>Continued From page 5</p> <p>comorbidities. The ED stated the residents had been educated on infection control issues including hand hygiene and social distancing. When asked if wearing a mask was an important component to prevent the spread or contraction of COVID-19, she stated, "Yes." The ED stated residents had been in-serviced about wearing a mask for outside visits, coming in contact with family members, and for going out to appointments, but they were not encouraged to wear a mask inside the community.</p> <p>During the seven-hour survey, no residents were observed to be wearing a mask when out of their apartments.</p> <p>The facility's Infection Control Plan/Community-Based Outbreak Plan, updated 11/04/2020, documented: "...Residents will be in-serviced on infection control including handwashing, social distancing, etc..."</p>	A1301		



#2
12/21/20
#17215
Reviewed
Accepted

Plan of Correction for Meridian Living at Manalapan-

A1273 8:36-18.1(b) Infection Prevention and Control Services

(b) The licensed professional nurse, in coordination with the administrator, shall be responsible for the direction, provision, and quality of infection prevention and control services. The health care services director, in coordination with the administrator, shall be responsible for, but not limited to, developing and maintaining written objectives, a policy and procedure manual, and an organizational plan for the infection prevention and control service.

1. How the corrective action will be accomplished for those residents found to have been affected by the deficient practice.

- No residents were found to be affected by this deficient practice. The corrective action for this deficient practice is to have our nurses complete Infection Control and Prevention Training. ✓

2. How the facility will identify other residents having the potential to be affected by the same deficient practice.

- All residents have the potential to be affected by this deficient practice. ✓

3. What measures will be put into place or systemic changes made to ensure that the deficient practice will not recur.

- Meridian Living at Manalapan Nurses, NJ Exec Order 26.4b1 and NJ Exec Order 26.4b1 have completed training in infection control and prevention. The courses began on NJ Exec Order 26.4b1 and were completed on NJ Exec Order 26.4b1. Attached are the completed transcripts for this training for both NJ Exec Order 26.4b1. I am also attaching a copy of the contract with our Health System for infection Control consultant services which is dated NJ Exec Order 26.4b1. ✓

4. How the facility will monitor its corrective actions to ensure that the deficient practice is being corrected and will not recur.

- The RN will continue to monitor required nurse training as directed and include in our infection control nurse training. The RN will update an report to the Executive Director monthly any training modules that are required. This practice is in effect and date of compliance is December 11, 2020. ✓



#2
12/21/2020
#17215
Reviewed
Accepted

Plan of Correction for Meridian Living at Manalapan-

A1301 8:36-18.3 (a)(6) Infection Prevention and Control Services

(a) Written policies and procedures shall be established and implemented regarding infection prevention and control, including, but not limited to, policies and procedures for the following:

6. Protocols for identification of residents with communicable diseases and education of

residents regarding prevention and spread of communicable diseases;

1. How the corrective action will be accomplished for those residents found to have been affected by the deficient practice.

- No residents were found to be affected by this deficient practice. The corrective action for this deficient practice is to Inservice, educate and encourage all resident to wear masks in the common areas of the community.

2. How the facility will identify other residents having the potential to be affected by the same deficient practice.

- All residents have the potential to be affected by this deficient practice.

3. What measures will be put into place or systemic changes made to ensure that the deficient practice will not recur.

- Meridian Living at Manalapan held resident Infection Control Inservice and in addition to cough etiquette, hand washing and social distancing we included importance of mask wearing, residents are encouraged to wear mask in common areas and provide each resident with a mask and information on where to get additional masks. The training information and the resident in-service sign in sheet are attached. ✓

4. How the facility will monitor its corrective actions to ensure that the deficient practice is being corrected and will not recur.

- The RN will incorporate "Importance of Mask Wearing" into our current Infection control training and education. Education will be done upon admission of each new resident. ✓
Monitoring of this training will be overseen by the RN. This practice is in effect and date of compliance is December 11, 2020